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|---|------------------------|--|---|-------------------------------|---|---------------------------------|--------------------------------------|--|--|--|
| PAYMENT ESTIMATE - CONTRACT PERFORMANCE | | | | | 1. DATE: | | 2.: SHEET OF | | | |
| 3. CONTRACTOR AND ADDRESS: | | | | 4. CONTRACT NUMBER: | | 5. | | | | |
| 6. DESCRIPTION OF WORK: | | | | 7. APPROPRIATION AND PROJECT: | | | | | | |
| 8. LOCATION: | | | 9. PERIOD COVERED BY THIS ESTIMATE: FROM: TO: | | 10. JOB ORDER NUMBER: | | 11. ESTIMATE NUMBER: | | | |
| 12. ITEM NO. | 13. DESCRIPTION | 14. CONTRACT | | | 15. TOTAL TO DATE | | | | | |
| | | A. QUANTITY AND UNIT | B. UNIT PRICE | C. AMOUNT | A. QUANTITY AND UNIT | | B. AMOUNT | | | |
| | | | | | | | | | | |
| TOTAL CONTRACT ----- | | | | | | TOTAL EARNINGS TO DATE ----- | | | | |
| 16. I CERTIFY that I have checked the quantities covered by the bill or estimate; that the work was actually performed; that the quantities are correct and consistent with all previous computations as actually checked; that the quantities and amounts are wholly consistent with the requirements of the contract or other instrument involved. SIGNATURE: PAYEE: TITLE: PER: DATE: TITLE: APPROVED (Contracting Officer): DATE: | | 17. I CERTIFY that the above bill is correct and just and that payment therefore has not been received; I further certify that the contractor and all subcontractors employed on the work have complied with the labor standards provisions of the contract. | | | 18. A. PREVIOUS DEDUCTIONS OTHER THAN ** RETAINED PERCENTAGE | | | | | |
| | | | | | B. PREVIOUS RETAINED PERCENTAGE | | | | | |
| | | | | | C. PREVIOUS PAYMENTS | | | | | |
| | | | | | D. LESS PREVIOUS EARNINGS (A + B + C) | | | | | |
| | | | | | E. EARNINGS THIS PERIOD (TOTAL EARNINGS TO DATE MINUS D) | | | | | |
| | | | | | F. LESS RETAINED PERCENTAGE | | | | | |
| | | | | | G. LESS DEDUCTIONS OTHER THAN RETAINED ** PERCENTAGE OF THIS PERIOD | | | | | |
| | | | | | H. AMOUNT DUE CONTRACTOR (E-F-G) | | | | | |
| 19. RECAPITULATION: | | | TOTAL PAID (C + H): | | | | | | | |
| TOTAL RETAINED % (B + F): | | | | | | | | | | |
| 20. VERIFIED AS TO QUANTITY AND AMOUNTS: | | | | | | | | | | |
| SIGNATURE | | | TITLE | | | DATE | | | | |